

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Karen M. Cheves et al.

Confirmation No.: 5388

Serial No.:

10/828,699

Examiner: Unknown

Filing Date:

April 21, 2004

Group Art Unit: 3763

Docket No.:

1001.1705101

Customer No.: 28075

For:

TRACTION CUTTING BALLOON

Mail Stop Missing Parts Commissioner for Patents PO Box 1450 Alexandria, VA 22313-1450

REQUEST FOR CORRECTED FILING RECEIPT

CERTIFICATE UNDER 37 C.F.R. § 1.10: The undersigned hereby certifies that this paper or papers, as described herein, are being deposited in the United States Postal Service, "Express Mail Post Office to Address", having an Express Mail mailing label number of: EV 314494825 US, in an envelope addressed to: Mail Stop Missing Parts, Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450 on this 26th day of July 2004.

By Kathlen L Bockley
Kathleen L. Bockley

Sir:

Attached is a copy of the official Filing Receipt received with regard to the above application for which issuance of a corrected Filing Receipt is respectfully requested.

Applicant requests correction of seventh Applicant's residence to read as follows:

San Diego.

The requested correction is not due to any error by Applicants, and no fee is due. Applicants respectfully request correction of this error and issuance of a corrected Filing Receipt in due course.

Respectfully submitted,

Karen M. Cheves et al.

Date: 7/26/04

By their Attorney,

David M. Crompton, Reg. No. 36

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| APPL NO. | FILING OR 371 (c) DATE | ART UNIT | FIL FEE REC'D | ATTY.DOCKET NO | DRAWINGS | TOT CLMS | IND CLMS |
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| 10/828,699 | 04/21/2004 | 3763 | 1032 | 1001.1705101 | 4 | 25 | 5 |

CONFIRMATION NO. 5388 28075 ILING RECEIPT CROMPTON, SEAGER & TUFTE, LLC 1221 NICOLLET AVENUE OC000000013082229* SUITE 800 MINNEAPOLIS, MN 55403-2420 \ P 2004 om/ton, Seager & Tufte, LLC Date Mailed: 06/28/2004

Receipt is acknowledged of this Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Filing Receipt Corrections, facsimile number 703-746-9195. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

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Assignment For Published Patent Application

SciMed Life Systems, Inc.;

Domestic Priority data as claimed by applicant

Foreign Applications

If Required, Foreign Filing License Granted: 06/25/2004

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